INSTRUCTIONS FOR COMPLETING APPLICATION FORM FOR INDIVIDUAL CAREGIVER MAINE MEDICAL USE OF MARIJUANA PROGRAM Effective July 1, 2010

The application form is to be completed and signed by the individual caregiver. A registry identification card will not be issued unless the Department has received and approved a patient who has named this caregiver.

If a caregiver is named by the patient, then the caregiver is required to complete and submit the caregiver application. Fees are payable to the Treasurer, State of Maine, as follows:

If the caregiver is non-growing, there is no fee

If the caregiver grows marijuana, the fee is \$300 for each patient each year

Section 1 is identifying information ABOUT the patient. This section must be completed in order to match the caregiver application with the patient application.

Section 2 is left blank for an individual caregiver.

Section 3 is to be completed by the individual primary caregiver. If the primary caregiver will grow marijuana, the caregiver MUST identify the physical address where marijuana will be grown, and describe the enclosed locked facility. **Important**: An enclosed, locked facility means a closet, room, or other enclosed area within a building, or an enclosed locked facility within a greenhouse, that is equipped with locks or other security devices that permit access only by a cardholder.

If the caregiver will prepare marijuana for ingestion by a patient, the caregiver must first obtain a food establishment license.

Caregivers will not be issued a caregiver registration card if he/she has had a drug conviction in the last 10 years for which he/she a sentence of one or more years MAY have been imposed, even if that sentence, or a part thereof, was suspended. Caregivers will be required to notify the Department of all states where the caregiver has resided in the last 10 years so that state background checks can be obtained.

The caregiver shall submit the application to:

Maine Medical Use of Marijuana Program
Division of Licensing and Regulatory Services
Department of Health and Human Services
11 State House Station
41 Anthony Ave.
Augusta, ME 04333

Any questions concerning the application can be submitted to <u>samantha.gay@maine.gov</u> or call 287-4235, and someone will contact you.